THE UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

IN RE: Residential Capital, LLC, Debtor(s).
1177 Avenue of the Americas
New York, NY 10036
20-1770738

Case No. 12-12020 MG Chapter 11

NOTICE OF WITHDRAWAL OF CLAIM

Pursuant to Fed. R. Bankr. P. 3006, the TN Dept. of Revenue withdraws the following claim. A copy of the withdrawn claim is attached hereto for reference.

Amount of Claim: \$661,981.32

Date Claim Filed: October 08, 2012 Account Number: claim # 1045

> Respectfully submitted, Robert E. Cooper, Jr. Attorney General and Reporter

/s/Marvin E. Clements, Jr.

Marvin E. Clements, Jr.

Senior Counsel BPR No. 016031 OFFICE OF THE ATTORNEY GENERAL BANKRUPTCY DIVISION

P O BOX 20207

Nashville, TN 37202-0207

Phone: 615-532-2504 Fax: 615-741-3334

CERTIFICATE OF SERVICE

I certify that on July 12, 2013 a copy of this pleading was deposited in the United States mail, first class, postage prepaid, or sent electronically (or both as required by local rules) to the parties set out below.

/s/Marvin E. Clements, Jr.

Marvin E. Clements, Jr. Senior Counsel

Office of the U.S. Trustee 33 Whitehall Street, 21st Flr. New York, New York 10004-2112 Larren M. Nashelsky Attorney for the Debtor(s) Morrison & Foerster LLP 1290 Avenue of the Americas New York, NY 10104 B10 (Official Form 10)

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United States Bankruptcy Court	PROOF OF CLAIM		gas krossna a klasojovija klasog sijecima er klikilik sepik sijecim ninds skala sepikolisiska ka jezica serbaja po v sacoslav klisiji jiha sobrazava.
SOUTHERN District of NEW YORK			
In re (Name of Debtor)	Case Number	Chapter .	Claim # 1045
GMAC MORTGAGE, LLC	12-12032	11	Claim # 1045 Initials 1045
NOTE: This form should not be used to make a claim for an administrative of the case. A "request" for payment of an administrative expense may be filed	expense arising after the pursuant to 11 U.S.C	ne commencement of . §503.	distillination in militari e constructivo con proprieta e estata e commune e e e e e e e e e e e e e e e e e e
In re (Name of Creditor) (The person or other entity to whom the debtor owes money or property)	Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.		RECEIVED
Name and Address Where Notices Should be Sent			OCT 0 8 2012
Tennessee Department of Revenue C/O Attorney General P.O. Box 20207	Check box if you have never received any notices from the bankruptcy court in this case.		KURTZMAN CARSON CONSULTANTS
Nashville, TN 37202-0207	Check box if the	address differs from	
Telephone No.	the address on the envelope sent to you by the court.		THIS SPACE IS FOR COURT USE ONLY
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 23-1694840/000	Check box if this claim replaces a previously filed claim, dated:		
1. BASIS FOR CLAIM			
☐ Goods sold		defined in 11 U.S.C. §11	
☐ Services performed ☐ Money loaned	Your social security	nd compensation (Fill out l	
☐ Personal injury/wrongful death	Unpaid compensati	ion for services performed	
☑ Taxes □ Other (Describe briefly)	from(da	te	(date)
2. DATE DEBT WAS INCURRED	3. IF COURT JUDG	MENT, DATE OBTAINED	:
4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims and (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be CHECK THE APPROPRIATE BOX OR BOXES that best describe your of SECURED CLAIM Attach evidence of perfection of security interest Brief Description of Collateral: Real Estate Motor Vehicle Other (Describe briefly) Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ UNSECURED NONPRIORITY CLAIM \$87,334.46	e in one category and polaim and STATE THE Wages, salaries, days before filling whichever is earli Contributions to a Up to \$1,800 of contributions of personal contributions. Alimony, mainten 11 U.S.C. §507(Taxes or penalties.)	art in anonner. AMOUNT OF THE CLAIM or commissions (up to \$4t of the bankruptcy petition er —11 U.S.C. § 507(a)(3 un employee benefit plan- leposits toward purchase, onal, family, or household ance, or support owed to a)(7) s of governmental units —	MATTIME CASE FILED. 1000), earned not more than 90 or cessation of the debtor's business, 13) — 11 U.S.C. §507(a)(4) I lease, or rental of property or use—11 U.S.C. §507(a)(6) a spouse, former spouse, or child —— —11 U.S.C. §507(a)(8)
XUNSECURED PRIORITY CLAIM \$574,646.86 Specify the priority of the claim.	I Amounte ara eub	pplicable paragraph of 11 ject to adjustment on 4/1/ ses commenced on or aft	98 and every 3 years thereafter er the date of adjustment.
5. TOTAL AMOUNT OF CLAIM AT THE TIME CASE FILED: \$87,334.46 \$ (Secured)	ed)	74,646.86 (Priority)	\$661,981.32 (Total)
Check this box if claim includes charges in addition to the principal am	ount of the claim. Attac	h itemized statement of a	Il additional charges.
6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.			THIS SPACE IS FOR COURT USE ONLY
 SUPPORTING DOCUMENTS: <u>Attach copies of supporting documents</u> invoices, itemized statements of running accounts, contracts, court jud documents are not available, explain. If the documents are voluminous 	gments, or evidence of s, attach a summary.	security interests. If the	
8. TIME-STAMPED COPY: To receive an acknowledgement of the filling of your claim, enclose a stamped, self-and envelope and copy of this proof of claim.			_ COP
DATE October 3, 2012 Sign and print the name and title, if any, authorized to file this claim (attach copy of the			
3729362121003 (NT Print Name: 111110 PE HOOKS	_ Signature:	Wrob E Hook	42

or imprisonment for up to 5 years, or both. 18 U.S.C. \S 152 and 3571.